# Randolph County Public Health Strategic Plan

## 2020-2022



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#### Introduction

Randolph County Public Health's Strategic Plan describes the agency's operational framework and key priority areas for the years 2020-2022. Through a collaborative process involving public health staff and community partners, health priorities have been identified for the county. By thinking creatively and critically, we will be better able to address priorities determined by staff and community partners over the next two years. The Strategic Plan outlines the department's commitment to focus on these areas while still meeting the operational goals of the agency.

Randolph County Public Health serves as the lead in many of the goals outlined in this report. However, a successful outcome is only achieved through the collaboration of agencies, organizations and committees working together toward these common goals. The strategic plan focuses on the entire health department. It is not intended to be a stand-alone document. It purposefully aligns with other important assessment, planning, and evaluation work such as the community health assessment, community health improvement plan, and other operational work plans.

The strategic plan will be revised as projects are addressed and completed. A report will be compiled and presented to Randolph County Board of Health annually.

#### Mission

To preserve, protect and improve the health of the community through collection and dissemination of health information, education and service programs aimed at the prevention of disease, protection of the environment and improvement of the quality of life for our citizens.

#### **Strategic Planning Process**

Members of Randolph County Public Health's Management Team and partnering agencies, organizations and committee members met for a day in December 2019 to determine the needs of key partners and to establish strategic priorities for public health.

#### Framework for Strategic Planning

- SWOT strengths, weaknesses, opportunities and threats
- Identify/define gaps in services and programs
- Identify current programs/resources (prevent duplication of services)
- Identify missing partners/stakeholders
- Identify core areas for goal setting for strategic plan

#### **Strategic Planning Session**

- Overall goals for Randolph County Public Health
- Develop objectives and action items
- Next steps
- Evaluation

#### **Contributors**

#### **Health Department Staff**

Susan Hayes, Health Director

Tara Aker, Assistant Health Director

Kathi Auman-Einig, WIC/Nutrition Director

Ernie Hall, Computer Support Technician

Jaron Herring, Environmental Health Supervisor

Brooke Hogan, Executive Assistant

Darlene Hill, Finance Officer

Rebecca Hinshaw, Nurse Manager

Alison Johnson, Health Educator

Wayne Jones, Environmental Health Supervisor

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Kendall Phillips, Health Educator

Lynsay Saunders, Nurse Manager

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Cindy Trogdon, Childcare Nurse Consultant

Wesley Vann, Animal Services Manager

April Wilburn, Director of Nursing

#### **Board of Health**

Marty Trotter

#### **External Support**

Alejandra Chavez, Public Health Education Intern

Elworth Cheek, Mt. Nebo Holiness Church

Tremonteo Crawford, Randolph Health

Ashley Duggins, Prevo Drug

Roxanne Elliot, First Health

Jennifer Ferguson, School Nurse RCSS

Amber Fernando, WIC Dietetic Intern

Kathryn Gillispie, School Nurse RCSS

Mark Hensley, Senior Adults Association

Zeb Holden, Archdale City Manager

Elbert Lassiter, Randolph Community College

Mary Joan Pugh, Community Partner

Amber Scarlett, WIC Dietetic Intern

The SWOT analysis conducted by the Strategic Planning Advisory Committee identified the following strengths, weaknesses, opportunities, and threats Randolph County Public Health should consider when drafting the 2020-2022 Strategic Plan. Randolph County Public Health's Management Team reviewed the SWOT analysis results and selected focus areas based on staff capacity, funding, and current resources.

#### **Strengths**

- Electronic Medical Records Analytics
- Community Connection
  - o Community Health Assessment Survey
  - o Collaboration "conveners"
- Broad approach to public health
- Strong support from leadership
  - Board of Health
  - o Board of County Commissioners
- Reliable
- Strong, experienced staff
- Well-rounded staff
- Adaptable
- Team approach internal and external

#### Weaknesses

- Family life instability
  - Lack of resources (mental health, opioid)
- Lack of awareness of public health responsibilities
  - Roles of public health vs. Department of Social Services (DSS)
- Lack of education going out to the public
  - Reach out to communities / schools
- Access to healthy food
- Getting uninsured signed up for Medicaid
  - Language barrier
  - Transportation barriers
- Representation of health care providers
  - o Engage with providers
- Instability of the future of Randolph Health
  - o Buyout
  - o People employed
- Lack of provider who can see male clients

#### **Opportunities**

- Corporate wellness messaging
- Social determinants of health
- Succession planning for public health
- Social media snap chat, twitter
- Appointments via text
- NCCare360
- Updating mission statement
- Creation of vision statement
- Better align partnerships
  - o Ensure services are not duplicated
  - Ensure services are accessible
- New staff as a result of retirements
- Dental clinic expanding services to adults
- Grants local and regional
- Expand outreach (program cards, brochures, expansion of website)
- Continued presence in community and schools
- Health education workforce and workflow (# issues per educator)
- Integration of health outreach into clinical environments
- Animal services transition
- Technology-public health app and patient portal
- Telehealth access for patients

#### **Threats**

- More staff retiring
- Medicaid, state and county funds
- Healthy lifestyle / quality of life
  - o Obesity
  - Nutrition
  - o Opioid crisis
  - o Economy
- Hospital services
- Access to mental health services
- Lack of public empathy
- Emerging communicable disease
- Lack of foresight of emerging public health issues from the public and funders
- Diminishing support resources faith-based communities due to lack of connectedness to the community; buy-in
- Perpetuation of stigma
- Lack of health equity focus, transportation, access to care, employment

#### Priorities, Objectives and Strategies

Randolph County Public Health identified the following five strategic priorities based on issues identified in the 2016 Randolph County Strategic Plan; 2017 Needs Assessment and Health Equity Data Analysis Randolph County report; input from the Strategic Planning Advisory Committee; and the community through the 2019 Community Health Needs Assessment.

- 1. Enhance access to medical, dental and mental health services in the community.
- 2. Promote wellness and lifestyle changes through outreach and education.
- 3. Enhance communication and marketing.
- 4. Integrate technology into clinic services, education and outreach, communication strategies and data analysis to ensure patient focused care.
- 5. Obtain funding through grants and public health department revenue to meet and/or exceed revenue budget targets.

This section outlines the strategies and objectives for each priority. The primary strategies that will support the objectives are listed below with the lead individual and key partners responsible for implementation.

Priority 1: Enhance access to medical, dental and mental health services in the community.

| Objective 1: By December 2022, collaborate with community partners to remove barriers to health care services.                    |   |  |               |   |
|---|---|--|---------------|---|
| Strategy  | Outcome   | Responsible<br>Program/Position                  | Time<br>Frame | Progress / Outcome  |
| 1.1a Create organic, virtual community resource guide which includes criteria to receive services and documents required to apply | Improve access to community services or resources | Health Education<br>Assistant Health<br>Director | Year 3        | In October 2021, Health Promotion and Policy (HPP) Team met with Randolph County Information Technology to assess capacity for new website to host virtual community resource guide. HPP is consulting with NC Department of Public Health to ensure a digital community resource guide meets state requirements. |
| 1.1b Support development of a LatinX coalition  | Strengthen connection to LatinX community         | Health Education                                 | Year 3        | In March 2022, HPP staff met with several county residents to assess current coalitions focused on supporting Latinx residents of Randolph County. As there are not any active coalitions centered on Latinx health needs, HPP staff will work with community partners to develop a group to fill the gap.        |

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| 1.1c Establish memorandum of agreement with providers in the community to accept referrals from RCPH (i.e. specialists, dental) | Increase access to specialty care | Health Director Director of Nursing    | Years 2-3 | Randolph County Public Health (RCPH) continues to have memorandum of agreements with the following providers to ensure access to care.  • Atrium Health Wake Forest Baptist Obstetrics and Gynecology - Asheboro (medical directors)  • Medical Resource Center for Randolph County (MERCE) (dental care, prenatal/postpartum care, primary care)  • Randolph Health (Breast and Cervical Cancer Control Program) |
|---|-----------------------------------|--|-----------|---|
| 1.1d Collaborate with DSS to educate community on Medicaid Transformation plans enrollment                                      | Increase access to care           | Health Education DSS                   | Years 2-3 | Nothing to report   |
| 1.1e Hire PA or FNP to see<br>male clients for sexually<br>transmitted infections   | Increase number of clients served | Health Director<br>Director of Nursing | Years 1-2 | In <b>November 2020</b> , a practitioner that can see male clients for STIs' was hired. Adding the nurse practitioner expanded family planning services.  |

| Objective 2: By December 2022, evaluate capacity for the department to provide comprehensive dental care for adults. |  |                                 |               |  |  |
|--|--|---------------------------------|---------------|--|--|
| Strategy   | Outcome                                    | Responsible<br>Program/Position | Time<br>Frame | Progress/ Outcome  |  |
| 1.2a Assess need for comprehensive dental care for adults  | Data to guide<br>comprehensive<br>services | Dental                          | Year 3        | As of <b>April 2022</b> , Medicaid patients were having difficulty finding dental care due to many dentists no longer accepting their insurance.   |  |
| 1.2b Assess costs of providing comprehensive dental care for adults  | Data to guide<br>comprehensive<br>services | Dental                          | Year 3        | In <b>February 2022</b> , practice management assessment was conducted by D4 Practice Solutions. The assessment demonstrated adult dental services are not financially feasible due to costs associated for materials, |  |

|  | staff time, and limited reimbursement rates. Providing dental services for adults in the future will require careful planning which includes a diverse payor mix. |
|--|---|
|--|---|

# Objective 3: By December 2022, enhance integration of clinical services to increase access to services for medical, dental, mental health and social determinants of health.

| Strategy   | Outcome                                    | Responsible<br>Program/Position               | Time<br>Frame | Progress/ Outcome  |
|--|--|---|---------------|--|
| 1.3a Identify an existing<br>Randolph County group for<br>local primary care providers<br>for collaboration          | Systems wide approach                      | Health Director<br>Director of Nursing        | Years 2-3     | Nothing to report  |
| 1.3b Train RCPH staff and make training available to local providers on social determinants of health screening tool | Clients linked to needed services          | Director of Nursing<br>NCCARE360<br>Navigator | Years 2-3     | In 2017, North Carolina Department of Health and Human Services (NCDHHS) created a validated social determinants of health screening tool for utilization among providers. However, it is not required.  Beginning in fall 2019, early implementation of Medicaid Managed Care required prepaid health plans to integrate the questions into their care management. Providers are encouraged to utilize the screening tool. As NCCARE360 uptake increases, providers may choose to utilize the screening tool. |
| 1.3c Reinitiate NCCARE360  | Increased access to community services and | Health Department<br>Staff<br>Community       | Years 2-3     | In <b>spring 2022</b> , a graduate student developed NCCARE360 informational materials, met with library-based social workers, conducted an awareness  |
|  | resources                                  | Partners                                      |               | survey of community partners, and collaborated with Unite Us to connect partners to training.  |

| 1.3d Support NCCARE360 | Access to        | Health Director | Years 2-3 | In <b>April 2022</b> , Randolph Community College Student |
|------------------------|------------------|-----------------|-----------|---|
| enrollment of three    | statewide system | NCCARE360       |           | Services has enrolled in NCCARE360.                       |
| community partners     |                  | Navigator       |           |   |
|                        |                  |                 |           |   |

## Priority 2: Promote wellness and lifestyle changes through education and outreach.

| Objective 1: By December 2022, re-establish Healthy Randolph wellness subcommittee. |                                    |                                 |               |                   |  |
|---|------------------------------------|---------------------------------|---------------|-------------------|--|
| Strategy  | Outcome                            | Responsible<br>Program/Position | Time<br>Frame | Progress/ Outcome |  |
| 2.1a Reach out to community partners  | Expand committee                   | Health Education                | Years 2-3     | Nothing to report |  |
| 2.1b Establish meeting calendar (in-person or virtual)                              | Commit to meeting schedule         | Health Education                | Years 2-3     | Nothing to report |  |
| 2.1c Identify two health issues to begin work on                                    | Action plans for two health issues | Health Education                | Years 2-3     | Nothing to report |  |

| Objective 2: By December 2022, implement evidence-based programs in the community related to chronic diseases. |                    |                  |           |  |  |
|--|--------------------|------------------|-----------|--|--|
| Strategy   | Outcome            | Responsible      | Time      | Progress/ Outcome                                  |  |
|  |                    | Program/Position | Frame     |  |  |
| 2.2a Establish a Diabetes  | Standardized       | Health Education | Years 2-3 | Beginning in <b>September 2021</b> , HPP began     |  |
| Self-Management  | diabetes education |                  |           | collaborating with Prevo Drug and primary care     |  |
| Education collaborative  |                    |                  |           | providers who offer prediabetes/diabetes education |  |
|  |                    |                  |           | services within the community to form a diabetes   |  |

|   |                              |                  |           | collaborative. They also plan to include Hodges Family Practice and potentially Randolph Health.  |
|---|------------------------------|------------------|-----------|---|
| 2.2b DSME collaborative drafts action plan to provide evidence-based diabetes education | Action plan for DSME program | Health Education | Years 2-3 | In <b>January 2022</b> , RCPH and Prevo Drug are collaborating with NCDHHS DSMES Quality Coordinator to build a DSMES program and secure accreditation/recognition. |
| 2.2c Identify two satellite locations to host DSME programs                             | Expand access to DSME        | Health Education | Year 3    | Nothing to report   |

| Objective 3: By December 2022, re-establish Healthy Randolph mental health subcommittee. |                            |                                 |               |                   |  |
|--|----------------------------|---------------------------------|---------------|-------------------|--|
| Strategy   | Outcome                    | Responsible<br>Program/Position | Time<br>Frame | Progress/ Outcome |  |
| 2.3a Reach out to community partners   | Expand committee           | Health Education                | Years 2-3     | Nothing to report |  |
| 2.3b Establish a meeting calendar (in-person or virtual)                                 | Commit to meeting schedule | Health Education                | Years 2-3     | Nothing to report |  |
| 2.3c Develop a community resilience action plan  | Action plan                | Health Education                | Year 3        | Nothing to report |  |

| Objective 4: By December 2   | Objective 4: By December 2022, re-establish Randolph County Opioid Collaborative/substance use task force. |  |               |  |  |  |
|--|--|--|---------------|--|--|--|
| Strategy   | Outcome  | Responsible<br>Program/Position                  | Time<br>Frame | Progress/ Outcome  |  |  |
| 2.4a Reach out to community partners   | Expand committee   | Health Education<br>Assistant Health<br>Director | Years 2       | In <b>fall 2021</b> , the Randolph County Opioid – Drug Community Collaborative reconvened. New partners are being added as current collaborative members recommend.   |  |  |
| 2.4b Establish a meeting calendar (in-person or virtual)   | Commit to meeting schedule   | Health Education<br>Assistant Health<br>Director | Years 2       | A meeting schedule has been established for <b>2022</b> . The collaborative meets bi-monthly and features a guest speaker. Workgroups to address prevention, harm reduction, and connect to care are being developed.  |  |  |
| 2.4c Encourage local primary care providers to participate in evidence-based training related to substance use disorders | Increase in screening for substance use disorders  Increase in referrals for care                          | Assistant Health<br>Director                     | Years 2-3     | Nothing to report  |  |  |
| 2.4d Evaluate the comprehensive action plan to address opioid/substance use disorders                                    | Action plan  | Health Education                                 | Year 3        | In <b>January 2022</b> , a final report of the initial action plan and outcomes was shared with collaborative. Opportunities were identified to build on previous successes. A comprehensive action plan will be developed with workgroups using the Results-Based Accountability (RBA) framework. |  |  |

**Priority 3: Enhance communication and marketing** 

| Strategy  | Outcome   | Responsible             | Time      | Progress/ Outcome |
|---|---|-------------------------|-----------|-------------------|
|   |   | Program/Position        | Frame     |                   |
| 3.1a Develop tagline to pair with RCPH branding | Incorporate tagline in all communications, publications, etc. | Health Department Staff | Years 2-3 | Nothing to report |
| 3.1b Implement tagline                          | Increase<br>awareness of<br>RCPH                              | Health Department Staff | Year 3    | Nothing to report |

| Objective 2: By December 2022, increase awareness of RCPH services (family planning, dental). |                 |                  |        |   |
|---|-----------------|------------------|--------|---|
| Strategy  | Outcome         | Responsible      | Time   | Progress/ Outcome   |
| 2.2 D   | T 1             | Program/Position | Frame  | D ' ' ' E L   |
| 3.2a Develop awareness  | Increased       | Health Education | Year 2 | Beginning in <b>February 2022</b> , HPP collaborated with |
| campaign regarding RCPH   | awareness of    | Clinic           |        | Family Planning staff to design social media graphics     |
| family planning services  | family planning |                  |        | and posters to promote services and increase interest.    |
|   | services        | RC Media         |        | Collaboration is ongoing to identify opportunities to     |
|   |                 | Communication    |        | promote program awareness and services.                   |
|   |                 | Specialist       |        |   |
| 3.2b Launch campaign  | Increased       | Health Education | Year 3 | Measure: "How did you hear about us?" included in         |
| regarding family planning   | utilization of  | Clinic           |        | registration  |
| services  | family planning |                  |        | Č   |
|   | services        | RC Media         |        | As of <b>April 2022</b> , social media graphics are       |
|   |                 | Communication    |        | undergoing media review and will be posted after          |
|   |                 | Specialist       |        | process is complete. Posters have been printed and will   |
|   |                 | 1                |        | be placed in high traffic areas by HPP staff.             |

| 3.2c Develop awareness    | Increased       | Health Education | Year 2 | Nothing to report                                 |
|---------------------------|-----------------|------------------|--------|---|
| campaign regarding RCPH   | awareness of    | Dental           |        |   |
| dental services           | dental services |                  |        |   |
|                           |                 | RC Media         |        |   |
|                           |                 | Communication    |        |   |
|                           |                 | Specialist       |        |   |
| 3.2d Launch campaign      | Increased       | Health Education | Year 3 | Measure: "How did you hear about us?" included in |
| regarding dental services | utilization of  | Dental           |        | registration                                      |
|                           | dental services |                  |        |   |
|                           |                 | RC Media         |        | Nothing to report                                 |
|                           |                 | Communication    |        |   |
|                           |                 | Specialist       |        |   |

Priority 4: Integrate technology into clinic services, education and outreach, communication strategies and data analysis to ensure patient focused care.

| Strategy  | Outcome  | Responsible Program/Position                           | Time<br>Frame | Progress/ Outcome |
|---|--|--|---------------|-------------------|
| 4.1a Develop workflow to utilize telehealth in clinic   | Increase # of<br>service provided<br>by telehealth | Director of Nursing<br>Nursing Supervisor<br>Providers | Years 2-3     | Nothing to report |
| 4.1b Ensure equitable access<br>to telehealth services to<br>Spanish speaking clients<br>(translator/language line) | Increase access to care to high-risk populations   | Interpreters   | Years 2-3     | Nothing to report |
| 4.1c Promotion of telehealth services   | Increase utilization of telehealth services        | Health Education<br>Clinic                             | Years 2-3     | Nothing to report |

| Objective 2: By December 2022, reduce missed appointments by utilizing text reminders for clients. |   |   |               |                   |
|--|---|---|---------------|-------------------|
| Strategy   | Outcome   | Responsible<br>Program/Position           | Time<br>Frame | Progress/ Outcome |
| 4.2a Assess feasibility of text reminders using CureMD software                                    | Determine use of text for appointment reminders | Director of Nursing                       | Year 2-3      | Nothing to report |
| 4.2b Implement text reminders for appointments   | Reduce missed appointments                      | Director of Nursing<br>Nursing Supervisor | Year 2-3      | Nothing to report |

Priority 5: Obtain funding through grants and health department revenue to meet and/or exceed budget targets.

| Objective 1: By December 2                                    | Objective 1: By December 2022, expand financial reporting, debt-setoff collections for dental health |                                 |               |  |  |
|---|--|---------------------------------|---------------|--|--|
| Strategy  | Outcome  | Responsible<br>Program/Position | Time<br>Frame | Progress/ Outcome  |  |
| 5.1a Continually seek grant funding for dental health program | Review available grant opportunities and apply for those that match our needs                        | Health Director<br>Dentist      | Years 1-3     | <ul> <li>Dental Health received grants from:         <ul> <li>Delta Dental Foundation Grant - \$5,000</li> <li>(February 2020) The grant enabled the purchase of endodontic equipment and supplies to increase the range of services provided to patients. This reduced the need for patients to be referred to services out of county.</li> </ul> </li> <li>NC Oral Health Collaborative Teledentistry Grant- \$1,913.00 (April 2020) The grant provided an annual subscription for teledental health software.</li> <li>BCBS of NC Foundation Grant - \$65,000.00 (September 2020) The grant allowed the dental</li> </ul> |  |

|  | clinic to transition from Eaglesoft to Dentrix software which improved reporting.  • The Duke Endowment Grant - \$375,000.00 (July 2021) The grant will enable the dental clinic to expand the comprehensive school-based oral health program by purchasing a vehicle and mobile dental equipment to provide dental screenings in Randolph County schools at no cost to families. Students with identified dental needs, such as dental caries, are referred to receive additional care at local dental offices. |
|--|--|
|--|--|

| Strategy  | Outcome  | Responsible<br>Program/Position     | Time Frame | Progress/ Outcome  |
|---|--|-------------------------------------|------------|--|
| 5.2a Participate in Minority<br>Diabetes Prevention<br>Program (MDPP) (Prevent<br>Type 2) | Implement 1 class in county with 15-20 individuals | Health Director<br>Health Education | Annually   | The grant amount is \$10,650 annually as long as the NC General Assembly continues to provide funding. HPP implemented the third class in January 2020. The location for the class First Pentecostal Church, Asheboro. There were six participants. The class was cancelled in <b>March 2020</b> due to COVID-19.  In <b>2022</b> , additional HPP staff was trained to facilitate MDPP. Due to reduced restrictions regarding gatherings, classes resume. |
| 5.2b Safe Kids program grants   | Secure annual grants                               | Health Education                    | Years 1-3  | In <b>April 2020</b> , Safe Kids was awarded 24 helmets from NC Department of Transportation.  In <b>2020</b> , Safe Kids was awarded funding for: \$400 in June for Operation Medicine Drop; \$400 in July to participate in Safe Kids Day, and \$400 in November for fire prevention.  |

|  |   |                  |           | In <b>2021</b> , Safe Kids was awarded \$1,200 in July for participating in a social media campaign related to various safety initiatives. Additionally, the coalition was awarded \$500 for "Never Leave Your Child Alone" campaign.  In <b>April 2022</b> , Safe Kids was awarded 100 helmets from NC Department of Transportation. |
|--|---|------------------|-----------|---|
| 5.2c Health Education program/project grants | Secure grants for corner store initiative, diabetes education, etc.                               | Health Education | Years 1-3 | Nothing to report   |
| 5.2d ABC Board annual grant                  | Secure annual grant for underage drinking prevention campaign, promoting Good Samaritan Law, etc. | Health Education | Years 1-3 | Nothing to report   |

| Objective 3: By December 2022, billing/coding quality assurance and quality improvement – increase Medicaid claims paid. |                   |                       |           |   |
|--|-------------------|-----------------------|-----------|---|
| Strategy   | Outcome           | Responsible           | Time      | Progress/ Outcome                                       |
|  |                   | Program/Position      | Frame     |   |
| 5.3a Medicaid  | Billing/Medicaid  | Health Director       | Years 2-3 | NC Medicaid Managed Care launched in <b>July 2021</b> . |
| transformation   | cost settlement,  | Director of Nursing   |           | Registration and billing staff refined processes to     |
|  | ensuring client   | Processing Assistants |           | ensure correct collection of insurance information to   |
|  | eligibility       |                       |           | reduce unpaid claims for services.                      |
| 5.3b Bill for COVID-19   | Receive           | Health Director       | Years 2-3 | Nothing to report                                       |
| vaccine administration   | reimbursement for | Darlene               |           |   |
|  | services offered  |                       |           |   |
|  | during COVID-19   |                       |           |   |

